

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/	/	7			
2	/	/				
3	/	/				
4	/	/				
5	/	/				
6	/	/				
7	/	/				
8	/	/				
9	/	/				
10	/	/				
11	/	/				
12	/	/				
13	/	/				
14	/	2				
15	/	2				
16	/	2				
17	/	2				
18	/	/	1			
19	/	/	1			
20				1		
21				1		
22				1		
23				1		
24				1		
25				1		
26				2		
27				1		
28				1		
29				2		
30				2		
31				2		
32				2		
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49						
50						
TOTAL IND.	6	↓	2	↓		↓
TOTAL DEP.	18	←	18	←		←
TOTAL CLAIMS	24		20			

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS